

HOWISON & ARNOTT, L.L.P.

A LIMITED LIABILITY PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

ATTORNEYS AT LAW
PATENT AND TRADEMARK MATTERS

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FACSIMILE COVER SHEET

DATE: August 30, 2005
TO: Central Fax Filing
COMPANY: U.S. Patent and Trademark Office
FAX NUMBER: 571-273-8300
FROM: Brian D. Walker
OUR FILE: OXMO-24,721
APPLICATION NO.: 09/392,208
FILED: September 8, 1999

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PTO/SB/21 (08-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/392,208	RECEIVED CENTRAL FAX CENTER
	Filing Date	September 8, 1999	
	First Named Inventor	William Clayton Scottfield	AUG 31 2005
	Art Unit	2644	
	Examiner Name	Walter F. Briney III	
	Total Number of Pages in This Submission	19	Attorney Docket Number

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): RCE
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	HOWISON & ARNOTT, L.L.P.	
Signature		
Printed name	Brian D. Walker	
Date	8/31/05	Reg. No. 37,751

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
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Typed or printed name	Brian D. Walker	Date 8/31/05

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PTO/SB/17 (12-04/2)


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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2008 (H.R. 4018). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/392,208 Filing Date September 8, 1999 First Named Inventor William Clayton Scofield Examiner Name Walter F. Briney III Art Unit 2644 Attorney Docket No. OXMO-24,721	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	395.00	

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input type="checkbox"/> Deposit Account Deposit Account Number: 20-0780/OXMO-24,721 Deposit Account Name: HOWISON & ARNOTT, L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
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FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims						Fee (\$) 50 200 360	Small Entity Fee (\$) 25 100 180
Total Claims Extra Claims Fee (\$) Fees Paid (\$)						Multiple Dependent Claims Fee (\$) Fees Paid (\$)	
- 20 or HP = _____ x _____ = _____ HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims Extra Claims Fee (\$) Fees Paid (\$)							
- 3 or HP = _____ x _____ = _____ HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof		Fee (\$) Fees Paid (\$)					
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): RCE						\$395.00	

SUBMITTED BY		
Signature 	Registration No. 37,751 (Attorney/Agent)	Telephone 972-479-0462
Name (Print/Type) Brian D. Walker	Date 9/31/05	

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OXMO-24,721

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: WILLIAM C. SCOTFIELD and STEVAN O. SAUNDERS

Serial No.: 09/392,208

Filed: September 8, 1999

Group: 2644

Examiner: Walter F. Briney III

For: VIRTUALLY POSITIONED HEAD MOUNTED 3-D SOUND SYSTEM

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8/31/05
(Date of Deposit)Brian D. Walker
(Name of Person Mailing Document)[Signature]
(Signature)8/31/05
(Date of Signature)AMENDMENT

In response to the Office Action dated June 14, 2005, please amend the above-referenced patent application as follows:

Amendments to the Claims are reflected in the listing of claims beginning on page 2 of this paper.

Remarks/Arguments begin on page 2 of this paper.

AMENDMENT AND RESPONSE
S/N 09/392,208
Atty. Dkt. No. OXMO-24,721